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						Igmmy Alexander (Depositor's name)				
						Carmy a Ockailla (Signature)				
APPLICATION NO		FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO					CONFIRMATION NO			
10/563.505				Wilhelmus Christianus Maria				TS6437US	8251	
THE OF INVENTION: EXPANDING A TUBULAR ELEMENT TO DIFFERENT INNER DIAMETERS										
APPIN TYPE	SMALL ENTITY ISSUE FEE DUE		JE FEE DUE	PUBLICATION FEE DU		PREV PAID ISSUE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO \$1440		S1440	\$300	S0			\$1740	12/24/2008	
EXAMI	ART UNIT		CLASS-SUBCLASS	5						
HARCOURT, BRAD			3676	166-207000						
I. Change of correspondence address or indication of "Fee Address" (3' CFR 1 363) Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached Use of a Custome Number is required.				2 For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents 1f no name is listed, no name will be printed						
3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3 11 Completion of this form is NOT a substitute for filing an assignment (A) NAME OF ASSIGNEE (B) RESIDENCE: (CHY and S1A1E OR COUNTRY)										
Shell	Houston, Texas									
Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🚨 Government										
4a The following fee(s) are submitted: 41 42 43 44 45 46 47 47 48 49 49 40 40 40 40 40 40 40 40				Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed Payment by credit card Form PIO-2038 is attached The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number						
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Authorized Signature			Date/	0/1	0/08 36,962	ght ann annha da a' abha 19 a Mheille Seolgaeth - Alba				
Typed or printed name		_h-	lalJa			Registration	No	36,962	and the second s	
This collection of informa an application Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi	ation is required by 37 Ciality is governed by 35 application form to the ons for reducing this burginia 22313-1450 DC	FR 1.31 U.S.C. USPTO rden, sho NOT S	1. The information 122 and 37 CFR or 122 and 37	on is required to obtaing 1.14. This collection of depending upon the collection of Complete Information (COMPLETED FORM)	n or re is est indiv Office AS TO	etain a benefit by mated to take 12 idual case. Any r, U.S. Patent an D THIS ADDRE	the pub minute commen d Trader SS SEN	olie which is to file (and s to complete, including ts on the amount of the mark Office, U.S. Dep D TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O for Patents, P.O. Box 1450	

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